



COMBINED DECLARATION AND POWER OF ATTORNEY

As below named inventor, I hereby declare that

This declaration is of the following type:

- ☐ original ☐ design ☐ supplemental
☐ national stage of PCT
☐ divisional ☒ continuation ☐ continuation-in-part

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPETITE STIMULATION AND REDUCTION OF WEIGHT LOSS IN PATIENTS SUFFERING FROM SYMPTOMATIC HIV INFECTION

the specification of which:

- ☐ is attached hereto.
☒ was filed on February 26, 1991 as Serial No. 07/661,514 or
☐ Express Mail No. _____, as Serial No. not known
yet, and was amended on _____ (if applicable).
☐ was described and claimed in PCT International Application No.
_____ filed on _____ and as amended under PCT
Article 19 on _____ (if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designated at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

| COUNTRY | APPLICATION | DATE OF FILING (day, month, year) | PRIORITY CLAIMED UNDER 37 USC 119 |
|---------|-------------|--------------------------------------|--|
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO |

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

| PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120 | | | | | |
|--|--------------------|--|--------------------|-----------|--|
| U.S. APPLICATIONS | | | Status (check one) | | |
| U.S. APPLICATIONS | U.S. FILING DATE | PATENTED | PENDING | ABANDONED | |
| 1. 0 / | | | | | |
| 2. 0 / | | | | | |
| 3. 0 / | | | | | |
| PCT APPLICATIONS DESIGNATING THE U.S. | | | Status (check one) | | |
| PCT APPLI- CATION NO. | PCT FILING DATE | U.S. SERIAL NOS. ASSIGNED (if any) | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

| ABOVE APPLN. NO. | DETAILS OF FOREIGN APPLN. FROM WHICH PRIORITY CLAIMED UNDER 35 USC 119 FOR ABOVE LISTED U.S./PCT APPLNS. | | |
|---------------------|---|-----------------|------------------------------------|
| | Country | Application No. | Date of filing (day, month, yr) |
| 1. | | | Date of issue (day, month, yr) |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

As a named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

C. Frederick Leydig, Reg. 16196
 John P. Bundock, Reg. 16678
 Paul L. Ahern, Reg. 17020
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I further direct that correspondence concerning this application be directed to LEYDIG, VOIT & MAYER, Two Prudential Plaza, Suite 4900, 180 North Stetson, Chicago, Illinois 60601-6780, Telephone (312) 616-5600.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Terry F. Plasse

Inventor's signature

Date

8/8/92

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Terry F. Plasse

Serial No.: 07/893,554

Filing Date: June 3, 1992

For: APPETITE STIMULATION AND REDUCTION OF WEIGHT LOSS IN
PATIENTS SUFFERING FROM SYMPTOMATIC HIV INFECTION

* * * * *

REVOCATION and SUBSTITUTION OF POWER OF ATTORNEY

Hon. Commissioner of Patents
and Trademarks
Washington, D.C. 20231

Dear Sir:

The undersigned, owner of the entire interest in and to U.S. Patent Application Serial No. 07/893,554, filed on June 3, 1992, hereby revokes all former Powers of Attorney and appoints the following registered Patent Attorneys, all members of SONNENSCHN NATH & ROSENTHAL, as its attorneys in the matter of the above-identified patent, with full power of substitution and revocation, to pay maintenance fees and to transact any and all business in the Patent and Trademark Office connected therewith:

| <u>Attorney</u> | <u>Registration No.</u> |
|---------------------|-------------------------|
| Howard B. Rockman | 22,190 |
| David G. Rosenbaum | 31,872 |
| Joseph A. Mahoney | 38,956 |
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| Jennifer H. Hammond | P-41,814 |
| Lana M. Knedlik | P-42,748 |

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner of Patents and Trademarks, Washington, D.C. 20231, on July 17, 1998

Joseph A. Mahoney
Joseph A. Mahoney
Reg. 38,956

Date

7/17/98

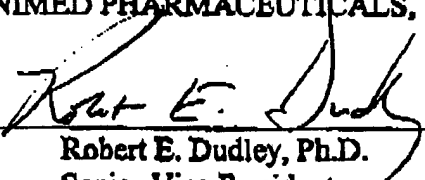
SERIAL NO. 07/893,554

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UNITED PHARMACEUTICALS, INC.

By:


Robert E. Dudley, Ph.D.
Senior Vice President

Dated:

7/15/98



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Terry F. Plasse)
Serial No.: 07/893,554) Group Art Unit 1617
Filing Date: December 19, 2000) Examiner: R. Travers
For: APPETITE STIMULATION AND)
INDUCTION OF WEIGHT GAIN IN)
PATIENTS SUFFERING FROM)
SYMPTOMATIC HIV INFECTION)

CHANGE OF
CORRESPONDENCE ADDRESS


Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Please change the Correspondence Address for the above-identified
patent to:

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Respectfully submitted,

By: 
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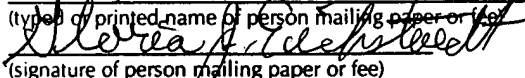
Dated: May 22, 2001

CERTIFICATE OF MAILING

Date of deposit: May 22, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service under 37 CFR 1.10 on the date indicated above and is addressed to U.S. Patent and Trademark Office, Washington, D.C. 20231

Gloria J. Eickstaedt

(typed or printed name of person mailing paper or fee)

(signature of person mailing paper or fee)



PATENT
ATTORNEY DOCKET NO. 01736599

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|-------------------------------|---|-----------------------|
| In re Patent Application of: |) | Group Art Unit: 1617 |
| |) | |
| Plasse, T. |) | Examiner: Travers, S. |
| |) | |
| Serial No.: 07/893,554 |) | |
| |) | |
| Filed: June 3, 1992 |) | |
| |) | |
| For: APPETITE STIMULATION AND |) | |
| INDUCTION OF WEIGHT GAIN IN |) | |
| PATIENTS SUFFERING FROM |) | |
| SYMPTOMATIC HIV INFECTION |) | |

Commissioner for Patents
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ASSOCIATE POWER OF ATTORNEY (37 C.F.R. § 1.34)

Please recognize the following as Associate Practitioner in this case:

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Please continue to send all correspondence to the undersigned.

Dated:


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